Permit #S00071593

FilmL.A., Inc.
6255 W Sunset Blvd, 12th Floor
Hollywood, CA 90028
t: (213)977-8600 - f: (213)977-8601
www.filmla.com

Summary Information

Permit No: S00071593 **Type of Permit:** STILL **Release Date:** 11/15/2013

Production Company MVG MEDIEN VERLAGSGESELLSCHAFT MBH

Insured Company Name MVG MEDIEN VERLAGSGESELLSCHAFT MBH

Contact Phone No. 1 310-446-2152
Contact Phone No. 2
Fax
Address 33 ARABELLASTR
MUNCHEN, 81925

Production Title SHAPE

Type of Production Still Photo

Producer Sandra Knauer

Director Sandra Knauer

1st AD Sandra Knauer

Production Manager Sandra Knauer

FilmL.A. Coordinator Yulizza Ramirez

Location Manager Sandra Knauer
Primary Phone Mobile - 310-446-2152
Secondary Phone Office - 818-347-9929

Location Assistant Sandra Knauer
Primary Phone Mobile - 310-446-2152
Secondary Phone

Fees

FILMLA STILL APPLICATION FEE	$60.00
SANTA MONICA STILL PHOTO APPLICATION FEE	$105.06
SANTA MONICA BEACH STILL PHOTO LOCATION FEE	$128.00

Total Permit Fee $293.06

Number of Locations 1

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Summary Information — Location

Permit Number	S00071593	**Location Manager**	Sandra Knauer
Production Company	MVG MEDIEN VERLAGSGESELLSCHAFT...	Primary Phone	Mobile - 310-446-2152
Insured Company	MVG MEDIEN VERLAGSGESELLSCHAFT...	Secondary Phone	Office - 818-347-9929
Production Title	SHAPE		

Location Address SANTA MONICA BEACH (EXCLUDING PIER), SANTA MONICA, CA, 90401

Location Name SANTA MONICA BEACH

Location Type Beach

Location Description WHEN HAVING WATER ACTIVITY OR REQUESTING USE OF LIFEGUARD TOWERS
* PRODUCTION NEEDS TO CONTACT THE LEAD SANTA MONICA LIFEGUARD CAPTAIN 2 DAYS IN ADVANCE AT 310-394-3261 TO DISCUSS THEIR ACTIVITY.

Film Dates 11/17/2013 - 11/17/2013 08:00 - 18:00 1 day

Open or Closed to the Public Open

Generic Conditions
All vehicles must be parked on private property
Must Maintain 5' Clearance on Sidewalks/Walkways
Must maintain local/emergency access
No cast or crew parking on area streets
No interference with vehicular or pedestrian traffic

Please see attached document MVG Agent Letter Waiver.pdf

Equipment on Location

Type	Quantity
Cast/Crew vehicles	3
Vans	2

Personnel on Location

Type	Quantity
Cast	2
Crew	10

Filming Activities Handheld equipment; Exterior establishing beauty still shots of models on sand /beach against scenery North and South of the Pier. ;

Jurisdiction **Political:** City of Santa Monica **Police:** Santa Monica Police Department **Fire:** Santa Monica Fire Department

Thomas Guide **Page:** 671 **Grid:** E3

Approvals

CITY OF SANTA MONICA - PUBLIC WORKS DEPARTMENT	Kathy Ruff
CITY OF SANTA MONICA POLICE DEPARTMENT	Mike Braaten
CITY OF SANTA MONICA/COMMUNITY AND CULTURAL SERVICES - ALL CITY PARKS/STATE BEACH AND BEACH PARKING LOTS	Debbie Braley

Parking

Base Camp
Location Type : Filming Location

Crew Parking
Location Type : Filming Location

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Request for Waiver
Worker's Compensation Insurance Requirement

Business

Legal Name: Joy Magazine, MVG Publishing

Address: Arabella Str. 33
81925 Munich, Germany

Contact Person (Name and Telephone): Petra Springer 3104004701

Legal Form
_____ Sole Proprietor
_____ Limited Partnership
_____ General Partnership
_X_ Corporation
_____ Business Trust
_____ Limited Liability Company
_____ Other: _____

Declaration:

With respect to the above-mentioned business, I hereby warrant that the business has no employees other than the owners, officers, directors, partners or other principals who have elected to be exempt from Worker's Compensation coverage in accordance with California law. I further warrant that I understand the requirements of Section 3700 et seq. of the California Labor Code with respect to providing Worker's Compensation coverage for any employees of the above mentioned business. I agree to comply with the code requirements and all other applicable laws and regulations regarding workers compensation, payroll taxes, FICA and tax withholdings and similar employment issues. I further agree to hold FilmL.A., Inc., harmless from loss of liability which may arise from the failure of the above-mentioned business to comply with any such laws or regulations. I therefore request that FilmL.A., Inc., waive its requirement for evidence of Workers' Compensation insurance in connection with the above-referenced work.

Signature

Owner, Officer, Director, Partnership or other Principal

Fashion Director
Title

2/11/13
Date

FilmL.A., Inc. Approval:

_____

_____
Date

Expires: _____
(one year from approval)

NO PERMIT